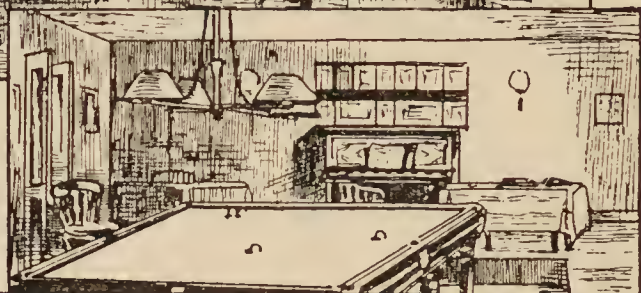


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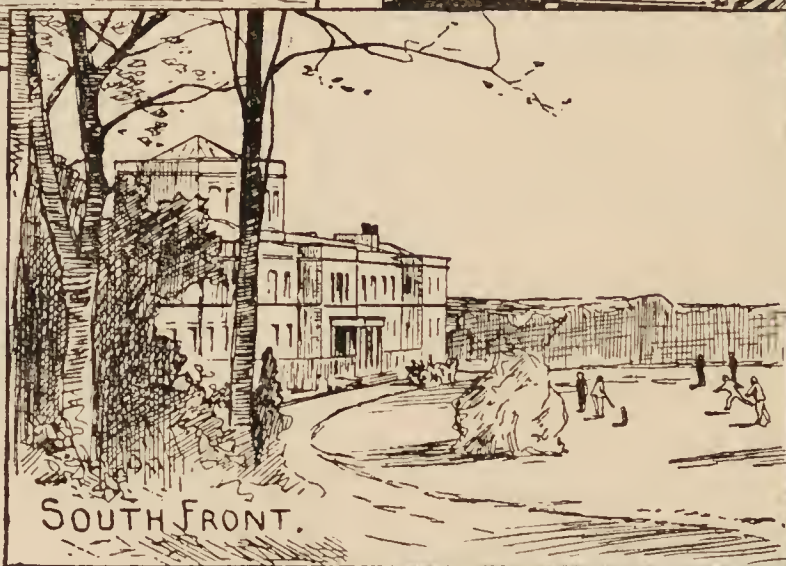


A DRAWING ROOM

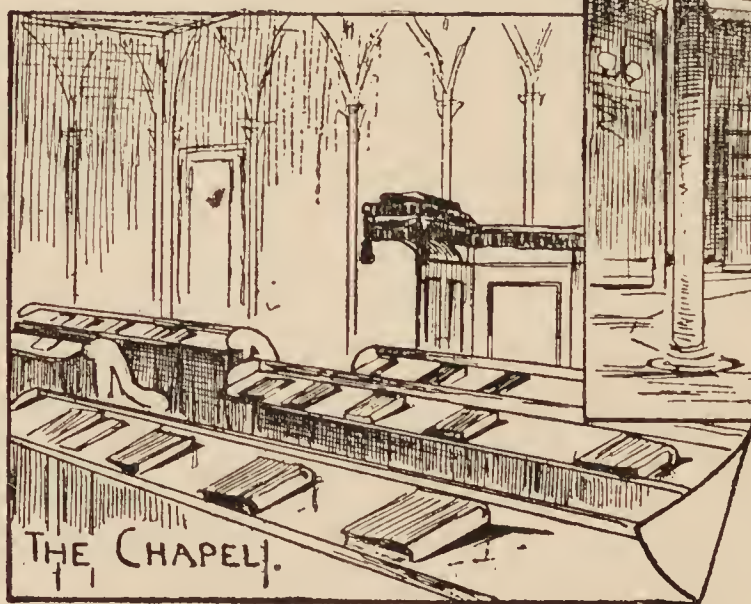


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MURRAY'S
ROYAL
ASYLUM
PERTH.

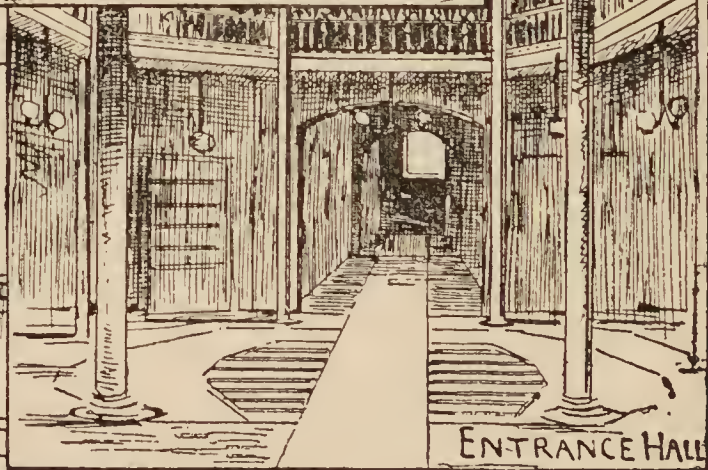


SOUTH FRONT.



THE CHAPEL.

S. Reid. fecit.



ENTRANCE HALL

THE
FIFTY-NINTH
Annual Report
OF
JAMES MURRAY'S
Royal Asylum



PERTH :
PRINTED BY J. YOUNG & SONS, 66 WATERGATE.
1886.



Kincarrathie.

Incorporated by



Royal Charter.

James Murray's Royal Asylum, Perth.

Chairman.

William Ross, Esq., Perth.

Directors Ex-Officio.

His Grace the Duke of Athole, K.T., Lord-Lieutenant of the
County of Perth.

W. E. Gloag, Esq., Sheriff of the County of Perth.

John Grahame, Esq., Sheriff-Substitute of the County of Perth.

Andrew Martin, Esq., Lord Provost of Perth.

J. M'Arthur, Esq., Dean of Guild, Perth.

J. P. Whittet, Esq., First Bailie, Perth.

J. Duncan, Esq., Convener of Trades of Perth.

J. M. Miller, Esq., President of the Society of Solicitors of Perthshire.

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Messrs. J. & R. Morison, Perth.

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Physician Superintendent.

A. R. Urquhart, M.D.

Assistant Medical Officer.

James Murray, M.B., C.M.

Chaplain.

Rev. W. D. Knowles, B.A., Perth.

Matron.

Miss Giddings.

Housekeeper.

Miss Crichton.



REPORT

OF THE

PHYSICIAN SUPERINTENDENT

FOR THE YEAR ENDING 31st MAY, 1886.



BEG to submit to the Directors of *General Statistics.* James Murray's Royal Asylum the Fifty-ninth Annual Report of the Physician Superintendent, together with tables of medical and general statistics.

On the 1st June, 1885, there were 97 persons on the Registers of the Asylum, and of these 2 males and 3 females were voluntary patients.

Thirty-two cases were admitted during the year, of whom 18 were males and 14 females.

Thirty-one were discharged during the year, 15 males and 16 females.

The number of deaths was 2, both males.

The total number under treatment was 129, and the average daily number on the books 95. The lowest number, 90, occurred on the 30th October; and the highest, 100, on the 10th June, 1885.

There now remain on the Registers 49 males and 47 females—total, 96. Two patients of each sex reside voluntarily in the Institution. Six are at Kincarrathie. The discharge of a gentleman and his immediate re-admission as a voluntary patient is not taken into account in the foregoing statement of changes.

The Admissions.

The average rate of the admissions for the last 21 years is 22. This year it is 32, precisely the same as in 1885.

The general characteristics of the cases received were as usual. Eighteen were complicated with bodily diseases, on which, in whole or in part, the mental derangement depended. These comprised troubles of the nervous, circulatory, respiratory, digestive, and reproductive systems, inclusive of the morbid effects of alcohol and venereal diseases; and, as might be expected, were nearly all met with in cases of recent inception. Those admitted suffering from chronic insanity, on the other hand, were usually found to be in good bodily health, although in many cases the history of former severe physical disease was ascertained. The interdependence of mind and body, the aberration of mind resulting so commonly from congenital mental defect, accidents, noxious drugs, or physical diseases, is so important as to demand what would otherwise be wearisome iteration; and these facts, therefore, go to add weight to the records that have accumulated with unvarying constancy in the past.

Cases of old standing.

If we consider the admissions for the year in regard to the duration of their malady before

reception into the Asylum, we find that 15 were of old standing, and therefore nearly all incurable.

As in former years, it is matter for regret that so many patients are detained to undergo every form of "private care" before the guardians can be induced to send them to places of treatment specially designed to secure their recovery. To the misfortunes and anxieties attending on a case of any other physical malady, there are super-added peculiar cares and difficulties inseparable from lunacy. These difficulties tell most severely on the middle class of society, with which we are immediately concerned. The wealthy and the pauper classes are protected in great measure by their affluence or by their poverty. In either case treatment is early sought, and is effectively applied. In wealth the services of skilled attendants are instantly commanded, and recovery is promoted in every approved manner. In poverty, by reason of poverty, the breadwinner cannot be kept at home, and the State provides fully equipped and excellently managed hospitals for his reception.

*Special
difficulties of
treatment of
Lunacy.*

But we here every year have to receive a great, though, happily, a yearly diminishing proportion of persons who have been allowed to slip into chronic mental disease, who block the wards with incurable cases, who depress the recovery rate, and with regard to many of whom it is felt that they ought to have been recoverable and made useful members of society. It will be readily perceived that if a man be seized with mental disease of a violent character, his early treatment, and probably early recovery, is insured by the

very nature of the symptoms. But, on the other hand, delusions and morbid habits of thought, permitting of delay in taking such a dreaded step as admission into an Asylum, are allowed to be so encouraged and so branded on the mind that their eradication is imperfect, if not impossible.

There must of necessity be a residuum of unrecovered persons, whose non-recovery cannot be counted a reproach to medicine. It is manifestly impossible that a man whose leg has been shot away can ever again walk on his ten toes ; and similarly it is not to be expected that a man suffering from certain degenerations of the substance of the brain will ever again find the organ of mind recover its pristine vigour. It is the endeavour of the medical profession to use the preventive and remedial measures of its art, that this ill-fated residuum may be reduced to a minimum ; and the results of the past year bear out the justice of the foregoing observations, inasmuch as 12 out of 17 received at an early stage of their malady have either recovered or are already convalescent.

*Asylums as
Hospitals.*

The public Hospitals for the Insane, of which James Murray's Royal Asylum is a type, are, in extending their lines to include every possible means of medical treatment, educating the public to believe that the aggregation of diseases, which have for their prominent symptom unsoundness of mind, are in the main to be cured, and best cured, in Asylums ; and in time, as a consequence, the present undeniable stigma attaching to these Hospitals will be less considered than the absolute welfare of the patient.

*The Asylum
Stigma.*

Many plans have been proposed to obviate the social stigma of legal certification, and in Scotland the admission of voluntary patients into Asylums has been provided for and encouraged; but while the law looks upon the liberty of the subject, and the legal disabilities of mental unsoundness, as of more importance than the curative measures to be employed, such difficulties must be accepted and grappled with by the medical profession, although always under protest.

I do not wish to be thought an opponent of the “private care” of the insane. *Private Care.* It is a form of treatment that cannot be abjured. Nor do I now wish to enter into the vexed question as to whether the Hospital for the insane ought to harbour chronic cases. The ends of such a charitable Institution as this can only be met by the retention of a proportion of these patients.

Those admitted came from the following localities :—Three from Perth, 6 from the County of Perth, 7 from Fife, 4 from Edinburgh, 6 from Glasgow, 1 from Dundee, and 5 from other parts of Scotland. All applications for admission from the City and County of Perth were carried into effect, except one from Crieff, who recovered at home before the final arrangements were completed. *Former Residences of Admissions.*

The average daily numbers on the books during the year were—certificated male patients, 46.84; female, 44.50. Voluntary male, 2.04; female, 1.86. Total, 95.26. The average number since 1864 is 76.73. The figures above-mentioned, therefore, show an increase of 18.53 over that average. *Average Numbers resident.* The greatest increase of population has,

fortunately, been coincident with the period during which the Seaside House and Kincarrathie have been in use, so that the evils of overcrowding have been averted.

General Health. The general health of the Establishment has been exceptionally good, as evidenced by the extremely low mortality, and freedom from cases of diarrhœa, erysipelas, and other epidemic disorders.

Accidents. There are four entries in the Accident Book, relative to slight injuries. The most serious were sprain of the wrist and fracture of the forearm, occurring in the cases of two aged ladies, who fell while moving about the house at their ordinary avocations.

Suicidal Cases. There were twenty-one patients of suicidal tendency under care during the year, and no fewer than seven of these had made more or less determined attacks upon their lives. No words of mine can adequately express my thankfulness that these were unaccompanied by fatal results.

Escapes. Two male patients escaped, but were speedily brought back by the attendants in charge. It is to be noted that neither escape resulted in any way from increased freedom nor unlocked doors, for both were patients of such a character as to require constant surveillance, and neither had been at any time in an open gallery.

The Recoveries. There is a considerable increase in the Recoveries compared with last year, directly owing to the more favourable nature of the cases received. Four males and seven females have been restored to health. Still the average rate of

Recoveries on the admissions, 35·48, is somewhat under that of previous years. On all admitted since 1864 the percentage is 38·29. The last Report of the General Board of Lunacy shows that the Recoveries on the admissions in 1884 were 39·5 per cent. of all private patients admitted into the public Asylums of Scotland, while the figures for the paupers (41·7) are still more favourable, owing no doubt to the more prompt treatment enjoyed by them.

Of those discharged unrecovered, 14 went out *The Removals.* relieved and 4 not improved. The reasons that prompt the removal of unrecovered patients, and their subsequent history, are of great interest. Of the 18 above-mentioned 8 were returned to their friends and 10 were transferred to other Asylums. Of these 8, two who left convalescent have since recovered, one who was lately removed contrary to my strongly expressed objections can hardly remain at large, and one has returned. The remaining four, although unrecovered, were properly removed as being manageable elsewhere. Three of those transferred to other Asylums left here as matter of family convenience, two were sent to Morningside in the hope of benefiting by the change, and five were removed in consequence of inability to pay the minimum board rate here. One of the last-named transfers belonged to the county of Perth, but his case did not come within the scope of the charitable action of this Institution.

The total number of patients transferred from other Asylums from 1st January, 1880, to this date *Transfers to and from other Asylums.* is 19; and to other Asylums, 31—total, 50.

The results of these transfers, as taken from our case-books, or communicated by the physicians to whose care they were sent, may be tabulated as follows :—

IMMEDIATE RESULTS.	TRANSFERS.	
	To this Asylum.	From this Asylum.
Improvement in Bodily condition,	13	17
Improvement in Mental condition,	12	12
No Improvement in Bodily condition,	6	14
No Improvement in Mental condition,	7	19
PRESENT STATE.		
Recovered or Convalescent, ...	1	6
Discharged Relieved,	0	2
Re-transferred,	1	1
Died,	3	3
Remaining under care,	14	12

Change of Asylum was therefore, to a definite and measurable degree, beneficial in a large proportion of these cases. To none was it harmful. At worst the result was indifferent. Of the 19 transferred to this Asylum, 13 gained weight. These statistics are just what might be expected, having regard to the everyday experience of mankind.

*Change of
Asylum for
Chronic
Patients.*

I again specially plead the cause of those chronic patients who are only fit for the wards of an Asylum, and whose turbulence or mindlessness prohibits their presence in our convalescent houses, or elsewhere. In accordance with my suggestions of two years ago, an arrangement has been made with the Royal Edinburgh Asylum for the interchange of such cases. I am hopeful that a more extended application of this plan of treatment will shortly be adopted, so that it may be in the

power of Royal Asylum patients, or their physicians for them, to choose a temporary residence in any of the sister Institutions of Scotland. Although such transfers can only be made under sanction of the General Board of Lunacy, and with consent of the guardians concerned, the expense and trouble involved are of small consequence, while the benefits accruing are, as indicated above, undoubted.

The mortality is low. The percentage of *The Deaths.* deaths on the average number resident is only 2·10. One resulted from apoplexy at the age of 76, in the case of a gentleman who had been a patient here for 47 years. He had lived through the many changes that have taken place since his admission, and with bright cheerfulness led the van in every detail of our social life. From the stores of his retentive memory he could relate the history of the Institution in all its phases. In former days he kept many of the business books of the establishment, and even down to the last Sunday of his life was actively employed in arranging the music for the Chapel services. His happy presence is sadly missed. The other death was of an entirely opposite kind. It occurred in the case of a young man who, weakened by pulmonary consumption, became maniacal, and died of inflammation of both lungs at the age of 25, after an illness of 15 days.

The Chapel has been found to be hardly adequate for the increased numbers. *The Chapel.* A Harvest Festival and Christmas-Day Service were held for the first time, and both were fully attended by patients and staff. Communion was administered;

Sunday and week-day services; the Chaplain's visits, and his assistance in the recreations of the patients, have been continued as formerly. The Parish Church is attended by seven patients, and two go to other churches in town.

The Amusements.

There has been no change in the routine life of the Asylum during the year. A large number of patients continue to enjoy the extended liberty that has proved so beneficial in the past. The house at Carnoustie, visits to friends, excursions in various directions, cricket and curling matches with other Asylums, &c., have been found as attractive as heretofore.

Once more I heartily thank those who so kindly and so freely give their time and talents to the entertainment of the patients, more especially Mr. T. S. Ross, Dundee, for his dramatic reading; Mr. Dow, for his orchestral concert; the Misses Greig, for their operatic entertainment; and the Messrs. Pullar and the Fechny School for the annual visit of their bands.

Statistical Tables.

I beg to present the statistical tables recommended by the Medico-Psychological Association. They will be found to summarise the work done by this Institution since its opening in 1827. The great labour involved in their compilation has been cheerfully bestowed by my colleague, Dr. Murray; and although the yearly percentages and averages gleaned from returns on our small numbers are apt to be misleading, taken year by year, the grand totals are of undoubted interest. These tables, therefore, are printed as an appendix to this Report, to bring it into conformity

with those of other Asylums, and to render the information accessible to those in search of it.

It is with pleasure that I am able to report so *The Staff.*
favourably year after year in regard to the staff of this Asylum. Dr. Greig retired from the post of Assistant Medical Officer in February, to enter the Army Medical Department. He carried our good wishes with him. His place has been filled by Dr. James Murray, who has proved worthy of entire confidence, and fully merits the high esteem of those authorities who recommended his appointment here.

It has been felt that Miss Giddings, who has *The Matron.*
faithfully and unselfishly discharged the onerous and responsible duties of Matron since 1853, should be relieved of some part of her burden, and it is suggested that her successor should be placed in the Asylum, while Miss Giddings would reside in Kincarrathie, and her valuable services as Honorary Matron to the entire Institution be thus retained.

The changes among the Attendants have again *The Attendants.*
been too numerous. Two men left to improve their position, and six nurses resigned on marriage or for the sake of change; one attendant was discharged as unsuitable; and three nurses for various misdemeanours. Those now remaining on the staff have performed their duties satisfactorily, especially those attendants in charge of the more important posts.

It is constantly endeavoured to raise the tone of the establishment through the attendants and nurses, and to render their lives as happy and useful as may be. The service ought to be made

attractive to superior minds, and no arrangement conducive to this end neglected. Consequently I can report well of the "Instructions to Attendants" issued last year. I think that the book has answered its purpose very effectively in the hands of those who are worthy of their high vocation in ministering to the afflicted. I may mention that the Annual Pic-nic, New-Year's Ball, and Christmas Tree for the Attendants and Servants of the Institution have been continued as formerly.

Kincarrathie.

The chief event of the year was the addition of the Mansion-House of Kincarrathie to the resources of the Institution. As indicated in former Reports, the ideal Asylum for private patients should consist of a central Hospital, perfectly adapted for the treatment of mental and bodily diseases, with adjunct villas for the reception of convalescents and those whose malady permits of their living under circumstances most nearly approaching home life. As a means of treatment, therefore, Kincarrathie is specially valuable; but it has also proved useful in relieving the overcrowding of the wards here, and for giving facilities for change to those for whom it is desirable. The handsome and comfortable house, so beautifully situated in private, extensive, and finely timbered grounds; the instant communication by telephone; and the proximity, yet distinct separation, of this part of the Institution, are also duly appreciated. Having regard to the experience of the three months during which Kincarrathie has been occupied, I feel justified in saying that it has proved entirely successful.

The Farm.

The farm is now in occupation as grass parks,

and the changed aspect of the property is a distinct improvement. The pigs, also, have been removed from the garden court to the steading.

The other alterations have been of a minor character, so that the extra expenditure is confined to these items :—

Farm Fencing and laying down to Grass, &c.,		£514
Kincarrathie {	Fittings and Alterations, ...	145
	Furnishings,	761
Sum,		£1420

In consequence of this heavy expenditure, it has not been deemed prudent to proceed with the new Infirmaries, although the importance of completing these additions as soon as practicable has not been lost sight of. *Infirmary Wings.*

The financial results of the year show the same satisfactory ratio of increase as I have been able to report on former occasions. The sum received from patients' boards amounted to £6644, which exceeds last year's results by £370. The average of other years since 1864 is £4781. The ordinary expenditure was £5550; the total expenditure, £6865; the total income, £6967—thus leaving an excess of income of £102. *Financial Results.*

The rates of board for the admissions were—

1	at	...	£300	...	£300
2	,,	...	250	...	500
2	,,	...	150	...	300
1	,,	...	105	...	105
6	,,	...	100	...	600
1	,,	...	90	...	90
2	,,	...	84	...	168
1	,,	...	64	...	64
12	,,	...	60	...	720
2	,,	...	52	...	104
2	,,	...	50	...	100

32, at an average of £95 6s 10d—Total, £3051

The rates of those discharged and died amounted to £2370. The yearly income per patient was £69 18s 8d. The cost, excluding expenditure on adapting Kincarrathie and on the farm, £58 8s 4d, and including the total expenditure, £72 5s 2d. The weekly cost per patient on the ordinary expenditure was £1 2s 5d—2d less than last year. The 96 patients on the Registers of the Asylum on 1st June, 1886, together pay at the rate of £6990 per annum, being an average board rate of £72 16s 3d.

Seventeen patients are maintained at lower rates than the ordinary minimum—11 pay £40, and 6 pay £30.

The Reports of the Visiting Commissioners in Lunacy will be found attached to this.

Conclusion.

Finally, I desire to express to the Directors my deep appreciation of their kindly advice and support.

A. R. URQUHART, M.D.,

Physician Superintendent.



TABLE

Showing Changes in the Population of the Asylum during the year ending 31st May, 1886.

		Certificated		Voluntary.		TOTAL.	Certificated		Voluntary.		TOTAL.
		M.	F.	M.	F.		M.	F.	M.	F.	
1st June, 1885.	{ Resident in the Asylum, ...	...	...	...	...	...	40	45	2	3	90
	{ Remaining on Pass, ...	...	...	...	...	...	...	I	...	...	I
	{ Remaining at Carnoustie, ...	...	...	...	...	...	6	...	...	...	6
	{ Total No. on Asylum Books, ...	...	...	...	...	...	46	46	2	3	97
Cases admitted—											
	First admissions, ...	15	11	...	I	27					
	Not first admissions, ...	3	2	I	...	6					
Total Cases admitted during the year,		...	...	...	...	...	18	13	I	I	33
Total Cases under care during the year,		...	...	...	...	...	64	59	3	4	130
Cases discharged and died—											
	Recovered, ...	4	7	...	...	11					
	Relieved, ...	10	4	...	...	14					
	Not Improved, ...	I	3	...	...	4					
	Voluntary Patients left, ...	..	...	I	2	3					
	Died, ...	2	...	...	...	2					
Total Cases discharged and died during the year, ...		...	...	...	...	...	17	14	I	2	34
31st May, 1886.	{ Total No. on Asylum Books, ...	...	...	...	...	...	47	45	2	2	96
	{ Remaining on Pass, ...	...	...	...	...	...	2	...	...	I	3
	{ Remaining at Carnoustie, ...	...	...	...	...	...	...	2	...	...	2
	{ Resident in Kincarrathie, ...	...	...	...	...	...	3	3	...	...	6
	{ Resident in the Asylum, ...	...	...	...	...	...	42	40	2	I	85

		Certificated.		Voluntary.		TOTAL.
		M.	F.	M.	F.	
Average numbers on Books during the year, ...	...	46·84	44·50	2·04	1·86	95·26
Lowest number resident, 30th October, 1885, ...	...	46	41	2	I	90
Highest number resident, 10th June, 1885, ...	...	47	48	2	3	100
Transferred from other Asylums, ...	...	I	I	...	...	2
Transferred to other Asylums, ...	...	6	4	...	...	10
Percentage of Recoveries on admissions, ...	...	22·22	53·84	...	...	35·48
Percentage of Deaths on average numbers resident,		4·16	...	...	...	2·10

FINANCIAL RESULTS SINCE 1875.

1	2	3	4	5	6	7	8	9	10	11	12
Year.	Average No. of Patients.	Revenue from Patients' Board.	Ordinary Expenditure.	Total Revenue.	Total Expenditure.	Excess of Receipts.	Excess of Payments.	Yearly Income per Patient on Column 3.	Yearly Cost per Patient on Column 4.	Yearly Cost per Patient on Column 6.	Expenditure on Alterations and Improvements.
		£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.	£ s. d.
1876	72	4818 18 4	5269 3 7	5011 1 6	5427 16 11	.....	416 15 5	66 18 7	73 3 8	75 7 8	550 19 11
1877	72	5080 15 11	5172 5 4	5263 13 9	5334 17 9	.....	71 4 0	70 11 4	71 16 9	74 1 10	721 7 8
1878	69	4958 3 0	4988 15 3	5142 0 3	5163 11 6	.....	21 11 3	71 17 1	72 6 0	74 16 7	491 19 11
1879	66	4604 9 9	4262 18 1	4785 5 11	5369 19 10	.....	584 13 1	69 15 3	64 11 9	81 7 3	935 5 0
1880	71	4672 3 11	4222 19 1	4853 0 1	5060 3 6	.....	207 3 5	65 16 1	59 9 6	71 5 4	511 10 8
1881	81	5385 12 7	4372 12 1	5546 5 11	4719 12 8	826 13 3	.....	66 19 9	53 19 7	58 5 4	54 11 0
1882	80	5660 17 9	4770 0 1	5817 1 5	5287 4 2	529 17 3	.....	70 15 2	59 12 6	66 1 9	290 4 11
1883	79	5366 17 0	4680 2 10	5527 3 8	5521 4 1	5 19 7	.....	67 18 8	59 4 10	69 17 7	503 15 1
1884	86	5981 6 3	4755 17 10	6127 12 8	5080 19 2	1046 13 6	.....	69 11 0	55 6 0	59 1 7	27 4 11
1885	89	6272 18 1	5313 17 2	6525 8 6	7079 16 11	.....	554 8 5	70 9 7	59 14 1	79 10 11	1509 5 5
1886	95	6643 15 7	5549 18 5	6966 19 0	6865 1 0	101 18 0	.....	69 18 8	58 8 4	72 5 3	1020 5 8



REPORTS
OF THE
COMMISSIONERS IN LUNACY
FOR THE YEAR.

REPORT BY DR. SIBBALD.

PERTH ROYAL ASYLUM,
14th January, 1886.

THERE are 45 gentlemen and 43 ladies resident at present in the Asylum as certificated patients; and 2 gentlemen and 2 ladies are voluntary inmates. Besides those already mentioned, 1 lady, who is absent on pass, is also on the books of the Asylum as a certificated patient.

Since last visit 6 gentlemen and 7 ladies have been admitted; 7 gentlemen and 10 ladies have been discharged; of whom 2 gentlemen and 4 ladies had recovered. Of the voluntary inmates 1 gentleman and 1 lady have been admitted, and 1 gentleman and 2 ladies have left. There has been no death in either class of patients.

Only one accident has occurred—fracture of the left radius, occasioned by a fall. No instance of the use of seclusion or restraint in the treatment of the patients is recorded, and there have been no escapes. One lady and 1 gentleman are at present confined to bed. Eight ladies and 9 gentlemen go beyond the grounds on parole; and, besides these, 10 ladies and 12 gentlemen go about the grounds on parole.

The Asylum was found in admirable order. The rooms and corridors are all comfortably furnished and provided with everything that is usual in the best private mansions. The improvements that have been effected during recent years have completely altered the character of the establishment; and the benefit which has thus been conferred on the patients is evinced by the greater degree of contentment which they exhibit. Several pleasing instances of this were observed during the visit. There is little reason to doubt, however, that this feeling of contentment is strengthened by the special attention given by Dr. Urquhart to the occupation of the patients in healthy work, so far as they are capable of it, or can be induced to engage willingly in it. No fewer than 25—that is, more than half—of the total number of gentlemen engage in gardening or other forms of out-door work; and, out of all those whose mental or bodily condition makes capable, there is only 1 gentleman at present who refuses to devote some portion of his time every day to useful occupation. Among the ladies who are able to work, all except 4 regularly occupy themselves in something useful. It seems

proper to add that, in regard to this particular feature of the management of an Asylum for private patients, this Institution holds a prominent and very creditable position.

An arrangement has been recently made, intended to confer a benefit both on the patients in this Asylum and on those in the Royal Edinburgh Asylum. Under this arrangement patients are, when it seems desirable, to be transferred for short periods from the one Asylum to the other. It not unfrequently happens in the treatment of the Insane that a change from one institution to another, even for a short period, exercises a beneficial influence; and it is proper to observe that this does not involve any supposition that the treatment adopted in the institution to which the transfer is made is better than what had been followed before the occurrence of the transfer. The mere change seems to give a healthy stimulus to the mental faculties.

It is understood that the proposal to erect Hospital sections is still under the consideration of the Directors. It is felt that, though the establishment is in most respects excellently equipped, it is still somewhat defective in this direction, and it must continue to be so till some provision, such as is shown in the plans now under consideration, has been made for the accommodation of the sick and the feebler patients.

The Directors have made a very important addition to their means of providing for the wealthier class of patients by taking a lease of the mansion and grounds of Kincarrathie, which

are in the neighbourhood of the Asylum. The house and its surroundings appear to be very well suited for their proposed purpose.

Since last visit the staff of the Asylum has been increased by the appointment of an Assistant Medical Officer. This appointment will be useful in many ways, and when Kincarrathie is occupied it will probably be found to have been inevitable.

The Books and Registers were examined, and were found regularly and correctly kept.

JOHN SIBBALD,

Commissioner in Lunacy.

REPORT BY DR. MITCHELL.

PERTH ROYAL ASYLUM,
3rd June, 1886.

There are 47 gentlemen and 45 ladies on the Register of the Asylum as certificated patients. In addition to these there are 4 voluntary inmates—2 gentlemen and 2 ladies. The whole number on the Registers is thus 96.

Of the certificated patients 7 ladies are at present in the seaside residence of the Asylum at Carnoustie, and 2 gentlemen and 1 lady are absent on pass visiting their friends. One of the voluntary inmates—a lady—is also absent on pass. The whole number actually resident in the establishment at this date is therefore 85, and of these 80 reside in the main building and 5 at Kincarrathie.

The changes in the population since the date of last visit are as follows :—

	<i>Male.</i>	<i>Female.</i>	<i>Total.</i>
Patients Admitted, - - -	11	4	15
„ Discharged Recovered,	2	3	5
„ Discharged Unrecovered,	6	0	6
„ Dead, - - - -	1	0	1

There are two entries in the Register of Restraint and Seclusion, referring to the use of the shower bath in the case of 2 patients. No accident is recorded, and no escape has taken place, though there are 15 patients on parole beyond the grounds and 16 on parole within the grounds.

Notwithstanding the fact that all the inmates of this Asylum are private patients, 55 of them are led to occupy themselves in useful work—that is, 65 per cent. of their whole number. This is attended with manifest advantage to the patients, and it is most creditable to the management of the Institution that such a fact can be recorded.

Kincarrathie mansion-house has been comfortably and tastefully furnished, and has been in occupation for some months. It is completely fulfilling the expectations as to its usefulness. It constitutes more than a mere addition to the accommodation which the Asylum can supply, being an important means of treatment.

In consequence of exceptional expenditure on the Farm and on Kincarrathie, the erection of the Hospital wards has been delayed; but it is believed that these desirable buildings will be commenced at no distant date. They will constitute a further addition to the means of treat-

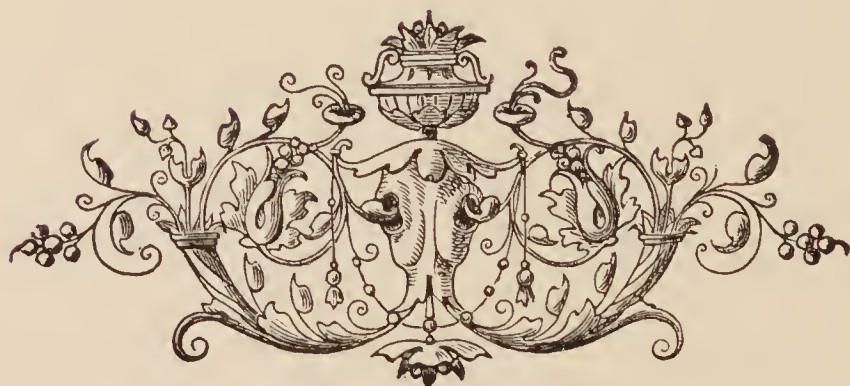
ment, and so increase the efficiency of the Institution in that direction of its work which is the highest—namely, the cure of the curable.

The visit left a most pleasant impression of the condition and progress of the Institution. It is managed with great ability and success, and it increasingly commands and deserves the confidence of the public.

The Books and Registers are very accurately kept. The careful way in which the Case Books are kept attracted favourable notice.

ARTHUR MITCHELL,

Commissioner in Lunacy.



STATISTICAL TABLES OF THE MEDICO-PSYCHOLOGICAL ASSOCIATION.

PREPARED BY DR. MURRAY, ASSISTANT MEDICAL OFFICER.

TABLE 1,

Showing the Admissions, Re-admissions, Discharges, and Deaths during the Year ending 31st December, 1885.

	M.	F.	T.	M.	F.	T.
In the Asylum, 1st January, 1885.				41	43	84
Cases Admitted—						
First Admissions,	12	11	23			
Not First Admissions,	2	5	7			
Total Cases Admitted,				14	16	30
Total Cases under care during the year, ...				55	55	114
Cases Discharged—						
Recovered,	2	4	6			
Relieved,	5	6	11			
Not Improved,	1	4	5			
Died,	2	1	3			
Total Cases Discharged or Died,				10	15	25
Remaining in the Asylum, 31st December, 1885,				45	44	89

	M.	F.	T.
Average resident during the year, ...	44·48	44·93	89·11
Persons under care ,, ...	54	59	113
Persons admitted ,, ...	13	16	29
Persons recovered ,, ...	2	4	6
Transferred to this Asylum,	0	2	2
Transferred from this Asylum,	1	6	7

TABLE 1a,

Showing (1) the Previous Attacks among Persons admitted during 1885, and (2) the Number of Times they had Previously Recovered in this or any Asylum.

(1) Number of Previous Attacks.	Persons.		
	Male.	Female.	Total.
Have had One Attack,	1	1	2
„ Two Attacks,	0	2	2
„ Three Attacks,	0	2	2
„ Four Attacks,	1	0	1
„ Many Attacks,	0	1	1

(2) Number of Times Patients Recovered.	In this Asylum.			In any Asylum.		
	M.	F.	T.	M.	F.	T.
Once,	0	1	1	0	1	1
Twice,	0	2	2	0	0	0
Three times,	1	0	1	0	0	0
Four times,	0	0	0	0	0	0
Many times,	0	1	1	0	0	0

TABLE 2,

Showing the Admissions, Re-admissions, Discharges, and Deaths, for the Twenty-one Years from the 1st of January, 1865, to the 31st December, 1885.

	M.	F.	T.	M.	F.	T.
Number resident, January 1st, 1865,				37	34	71
Persons Admitted during the period of 21 years,	198	198	396			
Re-admissions,	29	47	76			
Total Cases Admitted,				227	245	472
Total Cases under care during the 21 years, ...				264	279	543
Cases Discharged—						
Recovered,	66	82	148			
Relieved,	62	60	122			
Not Improved,	43	51	94			
Died,	48	42	90			
Total Cases Discharged and Died,				219	235	454
Remaining 31st December, 1885,				45	44	89

	M.	F.	T.
Average resident during the 21 years,	41'57	37'37	76'73
Transferred to this Asylum,	32	27	59
Transferred from this Asylum,	48	42	90

TABLE 2a,

Showing the Admissions and Recoveries of Persons from 1st January, 1865, to 31st December, 1885 (a period of Twenty-one Years).

History of Recoveries of Persons.				The same, only omitting all Persons transferred from other Asylums.		
	M.	F.	T.	M.	F.	T.
Persons Admitted during the 21 years, ...	198	198	396	150	156	306
Of whom were Discharged Recovered during the same period, being 37·37 per cent. of Persons Admitted, }	66	82	148	65	80	145
Of whom were Re-admitted Relapsed, ...	12	20	32	12	18	30
Leaving Recovered Persons who have not Relapsed, }	54	62	116	53	62	115
Relapsed Persons Discharged Recovered, ...	4	12	16	4	11	15
Net Recovered Persons, being 33·3 per cent. of Persons Admitted, }	58	74	132	57	73	130

TABLE 3,

Showing the Admissions, Discharges, and Deaths, with the mean Annual Mortality and Proportion of Recoveries per cent. of the Admissions, for each Year since the opening of the Asylum, 30th of June, 1827.

Year.	Admitted.			DISCHARGED.									Died.			Remaining 31st December in each year.			Average Numbers Resident.			Percentage of Recoveries on Admissions.			Percentage of Deaths on the Average Numbers Resident.		
				Recovered.			Relieved.			Not Improved.																	
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.			
1827-1864.	719	752	1471	255	341	596	92	116	208	180	159	339	155	102	257	37	34	71	73.13	62.30	135.4	36.72	45.34	40.52	5.74	4.41	7.95
1865.....	13	9	22	4	3	7	5	2	7	2	7	9	1	0	1	38	31	69	39.6	34.00	73.6	30.77	33.3	31.82	3.21	...	1.36
1866.....	12	6	18	4	6	10	5	4	9	2	1	3	2	2	4	37	24	61	37.09	24.80	61.89	33.3	100	44.4	5.39	8.02	6.46
1867.....	15	7	22	3	3	6	5	2	7	0	0	0	5	1	6	39	25	64	39.67	25.46	65.13	20	42.85	27.27	12.6	3.92	9.21
1868.....	13	13	26	5	2	7	2	0	2	1	2	3	4	3	4	43	31	74	38.08	30.09	68.17	38.40	15.38	26.92	2.62	9.97	5.87
1869.....	22	18	40	4	4	8	7	2	9	2	2	4	3	0	3	49	41	90	45.77	40.56	86.33	18.18	22.2	20	6.55	...	3.47
1870.....	10	17	27	5	4	9	2	3	5	4	7	11	2	4	6	46	40	86	48.54	41.75	90.29	50	23.53	33.3	4.12	9.58	6.64
1871.....	9	25	34	3	6	9	4	6	10	4	4	8	2	6	8	42	43	85	45.65	41.87	87.52	33.3	24	26.47	4.38	14.27	9.13
1872.....	13	9	22	4	4	8	2	1	3	3	4	7	1	2	3	45	41	86	42.92	41.10	84.02	30.77	44.4	36.36	2.32	4.86	3.57
1873.....	8	9	17	3	3	6	2	2	4	5	5	10	2	2	4	41	38	79	42.70	40.64	83.34	37.5	33.3	35.5	4.68	4.92	4.79
1874.....	6	13	19	3	2	5	3	6	9	2	2	4	2	3	5	37	37	74	37.39	41.23	78.62	50	15.38	26.32	5.35	7.27	6.35
1875.....	5	8	13	2	3	5	1	2	3	1	0	1	4	3	7	34	37	71	36.36	34.19	70.55	40	37.5	38.46	11.00	8.77	9.92
1876.....	10	7	17	2	5	7	0	1	1	0	3	3	3	3	6	39	32	71	36.87	37.16	74.03	20	71.33	37.1	8.14	8.10	8.10
1877.....	8	6	14	2	0	2	5	3	8	5	1	6	0	0	0	35	34	69	36.83	34.41	71.24	25	...	13.28	...	...	...
1878.....	2	7	9	1	6	7	1	2	3	2	2	4	1	0	1	32	31	63	33.18	35.74	68.92	50	85.71	77.7	3.01	...	1.45
1879.....	9	10	19	2	3	5	0	1	1	1	0	1	2	2	4	36	35	71	34.13	33.79	67.92	22.2	30	26.31	5.83	5.92	5.88
1880.....	10	16	26	2	6	8	2	1	3	0	0	0	4	1	5	38	44	82	37.80	38.93	76.73	20	37.5	30.77	15.82	2.56	6.43
1881.....	10	7	17	5	5	10	2	7	9	1	0	1	3	1	4	37	38	75	38.12	40.58	78.70	50	71.43	58.82	7.87	2.46	5.06
1882.....	6	10	16	1	0	1	3	4	7	2	3	5	4	1	5	33	40	73	31.58	40.95	72.54	16.6	...	6.25	12.60	2.44	6.89
1883.....	21	14	35	6	8	14	2	2	4	2	3	5	2	2	4	42	39	81	38.24	42.00	80.24	28.57	57.14	40	5.20	4.76	4.99
1884.....	11	18	29	3	5	8	4	3	7	3	1	4	2	5	7	41	43	84	41.88	40.57	82.45	27.27	27.7	27.58	4.75	12.07	8.48
1885.....	14	16	30	2	4	6	5	6	11	1	4	5	2	1	3	45	44	89	44.18	44.93	89.11	14.28	25	20	4.52	2.44	3.37
For 21 yrs.	227	245	472	66	82	148	62	60	122	43	51	94	48	42	90	Average or Percentage.			41.57	37.37	76.73	34.29	29.08	31.14	5.53	5.35	5.46
General Totals, }	946	997	1943	321	423	744	154	176	330	223	210	433	203	144	347				33.93	42.43	38.29	8.6	6.34		8.6	6.34	7.43

TABLE 4,

Showing the History of the Annual Admissions since the opening of the Asylum, 30th June, 1827, with the Discharges and Deaths, and the Numbers of each Year remaining on the 31st December of the Year reported on.

Admitted.				Of each Year's Admissions Discharged and Died in 1885.										Total Discharged and Died of each Year's Admissions to 31st December, 1885.										Remaining of each Year's Admissions, on 31st Dec., 1885.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
Year.	New Cases.		Relapsed Cases.		Total.	Recovered.			Relieved.			Not Improved.			Died.			Recovered.			Relieved.			Not Improved.			Died.			M.	F.	T.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
	M.	F.	M.	F.		M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
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TABLE 5,

Showing the Causes of Death during the Twenty-one Years—1865 to December 31st, 1885,—together with the Ages at Death.

[illegible]

Ascertained by Post Mortem Examination,

* Deaths occurring in the Year 1885.

TABLE 6,

*Showing the Length of Residence in those Discharged Recovered
and in those who have Died during the Year 1885.*

Length of Residence.						Recovered.			Died.		
						M.	F.	T.	M.	F.	T.
1 Month and under 3 Months,	...	...				1	2	3	...	...	...
3 ,, ,, 6 ,,	...	...				1	1	2	...	...	...
6 ,, ,, 9 ,,	...	...				...	...	...	...	...	...
9 ,, ,, 12 ,,	...	...				...	...	...	0	1	1
1 Year ,, 2 Years,	...	...				0	1	1	1	0	1
40 Years and upwards,	...	...	...	...		...	...	...	1	0	1
Total,	...	...	...	...		2	4	6	2	1	3

TABLE 7,

Showing the Duration of the Disorder on Admission in the Admissions, Discharges, and Deaths, during the Year 1885.

CLASS.	Admissions.			Discharges.						Deaths.			
				Recovered.			Removed Relieved or otherwise.						
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
FIRST CLASS.													
First attack, and within 3 months on admission,	5	3	8	1	1	2	1	3	4	1		1	
SECOND CLASS.													
First attack, above 3, and within 12 months on admission,	4	4	8	0	1	1	3	3	6	...	...	...
THIRD CLASS.													
Not first attack, and within 12 months on admission,	1	5	6	0	1	1	0	1	1	...	...	...
FOURTH CLASS.													
First attack or not, but of more than 12 months on admission,	4	4	8	1	1	2	1	3	4	0	1	1	
FIFTH CLASS.													
Congenital,	...	...	...	...	...	...	1	0	1	1	0	1
Total,	14	16	30	2	4	6	6	10	16	2	1	3	

TABLE 8,

Showing in Quinquennial Periods the Ages of those Admitted, Recovered, and Died, during the Year 1885, and of those remaining on 31st December, 1885.

		Admissions.			Recovered.			Deaths.			Resident 31st Dec., 1885.		
		M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
5 years and under 10 years,	...	...	...	...	...	...	...	...	...	...	...	...	...
10 "	...	0	...	...	...	...	...	...	...	...	...	...	...
15 "	...	1	0	1	...	...	...	...	...	...	...	...	...
20 "	...	1	2	3	...	...	...	...	...	...	1	3	4
25 "	...	3	1	4	...	...	...	...	...	...	6	1	7
30 "	...	1	2	3	...	...	...	...	...	...	5	1	6
35 "	...	1	0	1	...	...	...	...	...	...	3	4	7
40 "	...	2	2	4	0	2	2	...	...	...	5	0	5
45 "	...	1	4	5	1	1	1	...	...	...	2	7	9
50 "	...	3	3	6	1	1	2	...	...	...	7	5	12
55 "	...	0	1	1	...	...	...	...	...	...	4	4	8
60 "	...	...	...	...	...	...	...	...	...	...	6	5	11
65 "	...	1	0	1	...	...	...	1	0	1	4	5	9
70 "	...	0	1	1	...	...	...	...	...	...	1	5	6
75 "	...	...	...	...	...	...	...	1	0	...	0	2	2
80 "	...	...	...	...	...	...	...	...	...	...	0	2	2
85 "	...	...	...	...	...	...	...	0	1	1	1	0	1
90 "	...	...	...	...	...	...	...	...	...	...	...	...	...
Unknown, ...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total,	...	14	16	30	2	4	6	2	1	3	45	44	89

TABLE 9,

Showing the condition as to Marriage, in the Admissions, Recoveries and Deaths, during the Year 1885, and of Patients Resident December 31st, 1885.

Condition in reference to Marriage.	Admissions.			Recovered.			Deaths.			Patients Resident, Dec. 31st, 1885		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Single, ...	7	10	17	0	2	2	2	0	2	37	31	68
Married, ...	7	4	11	2	2	4	0	0	0	6	8	14
Widowed,	0	2	2	0	0	0	0	1	1	2	5	7
Unknown,	0	0	0	0	0	0	0	0	0	0	0	0
Total,	14	16	30	2	4	6	2	1	3	45	44	89

TABLE 10,

Showing the Probable Causes of Insanity in the Patients admitted during the Year 1885.

Causes of Insanity.		Number of instances in which each cause was assigned.																	
		Admissions { M., 14; F., 16; T., 30 } No. of Cases.										Total.							
		As Predisposing Cause.			As Exciting Cause.			As Predisposing or Exciting.											
		M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.						
MORAL.																			
	Domestic trouble,	...	...	...	0	2	2	0	1	1	0	3	3	2	1	1	1	1	1
	Business worries,	...	...	...	1	0	1	0	1	1	1	1	1	1	1	1	1	1	1
	Religious excitement,	...	...	...	...	...	...	1	0	1	1	0	1	1	1	1	1	1	1
	Love affairs, ...	...	...	...	...	...	...	0	...	...	0	1	1	1	1	1	1	1	1
PHYSICAL.																			
	Intemperance in drink,	...	...	...	1	0	1	1	0	1	1	3	0	2	1	1	1	1	1
	Venereal disease,	...	...	...	...	...	...	...	...	...	...	0	0	2	1	1	1	1	1
	Self-abuse,	...	...	...	...	...	...	...	...	...	...	4	0	4	1	1	1	1	1
	Puerperal state, ...	...	...	...	...	...	...	...	...	...	...	0	1	1	1	1	1	1	1
	Uterine disorder,	...	...	...	...	...	...	...	...	...	...	0	1	1	1	1	1	1	1
	Climacteric, ...	...	...	...	0	1	1	0	1	1	0	0	0	2	1	1	1	1	1
	Previous attacks,	...	...	...	2	3	5	...	...	...	...	...	...	...	...	...	...	...	...
	Heredity, ...	...	...	...	0	2	2	...	...	...	...	3	4	7	...	...	...	...	...
	Fall on head,	...	...	...	...	...	...	0	1	1	1	...	...	...	...	...	...	...	...
	Debility, ...	...	...	...	...	...	...	...	...	...	...	1	0	1	...	...	...	...	...

TABLE 11,

Showing the Form of Mental Disorder on Admission in the Admissions, Recoveries, and Deaths of the Year 1885; and the Form of Mental Disorder of the Inmates, December, 1885.

Form of Mental Disease.	Admissions.			Recovered.			Deaths.			Remaining.			
										Form of Mental Disorder, 31st Dec., 1885.			
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
MANIA.													
Acute, ...	5	8	13	2	3	5	...	...	...	0	2	2
Chronic, ...	0	4	4	...	...	...	1	1	2	2	7	9
Recurrent, ...	...	...	...	...	...	...	...	...	...	4	3	7
MELANCHOLIA.													
Acute, ...	6	1	7	0	1	1	...	...	...	5	0	5
Chronic, ...	0	1	1	...	...	...	...	..	...	2	4	6
Recurrent, ...	1	0	1	...	...	...	...	...	...	1	0	1
DELUSIONAL INSANITY, ...													
	0	1	1	...	..	...	...	...	...	8	10	18
DEMENTIA, ...													
	2	1	3	...	...	...	1	0	1	23	18	41

TABLE 12,

Showing the Station or Occupation of Patients admitted during the Year 1885.

MALES.				FEMALES.			
Clerk,	...	...	2	At Home,	...	...	7
Dyer, ...	...	...	1	Broker, ...	...	...	1
Clothier,	..	...	1	Jeweller,	...	...	1
Gentleman,	...	...	1	Gentlewoman,	...	...	6
Gamekeeper,	...	...	1	Merchant,	...	...	1
Farmer,	...	...	3				
Merchant,	...	...	3				
Sculptor,	...	...	1				
Schoolboy,	...	...	1				
TOTAL, ...			14	TOTAL, ...			16

Incorporated by



Royal Charter.

JAMES MURRAY'S ROYAL ASYLUM, PERTH.

THIS Asylum is healthily situated on the Hill of Kinnoull, in the immediate vicinity of Perth, and commands a prospect extending over the Valley of the Tay to the Range of the Grampians. It has been from time to time so altered and improved as to render it an efficient Hospital, as well as a comfortable Home, for all classes of Private Patients. Being a Chartered Corporation under the management of a Statutory Board, who have no pecuniary interest in its prosperity, the profits on each year's transactions have been devoted to modernising and perfecting the original fabric.

The Directors having felt the necessity of procuring additional accommodation, to be used as a convalescent home, and for patients of the higher classes suffering from the milder forms of mental disease, have taken on lease the Mansion-House of Kincarrathie, in the neighbourhood of, but distinctly separated from, the Asylum. The private and extensive policies afford every facility for exercise and recreation within the grounds.

The arrangements throughout the entire Institution are of a Domestic Character, with ample means of Occupation and Amusement. The above-mentioned Convalescent Home, a Seaside Residence, and Carriage Exercise are available, and the utmost Liberty, with due regard to Safety, is accorded.

The Institution contains no Paupers, and no publicity is implied in the proceedings connected with the admission of Patients, nor in the term "Royal Asylum."

The various houses of the Establishment being connected by Telephone, are all within the surveillance of the Physician Superintendent.

Applications for admission should be addressed to Dr. Urquhart, Physician Superintendent, who will give all necessary information regarding Rates of Board, and from whom may be obtained the Statutory Forms, which must be duly filled up before Patients can be received.

